Page 1 of 7

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	COURT CASE NUMBER
JAMES B. MUEPHY	0:20-4319-54L-P.J.
DEFENDANT MILE LLINT, ATLEN Co. Shep If	TYPE OF PROCESS
SERVE S NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION.	RIPTION OF PROPERTY TO SEIZE OR CONDEMN
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 435 WIRE ROAD ATLEN. SL	29801
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be
JAMES B. MURPHY # 137361	Number of parties to be
435 WILL Rd. ATKLEW. South CARSTELA	served in this case
	Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERV All Telephone Numbers, and Estimated Times Available for Service):	ICE (Include Business and Alternate Addresses.
Fold S	Fold
₩	
SOLE SOLE SOLE SOLE SOLE SOLE SOLE SOLE	•
A PURINTER	LEPHONE NUMBER DATE
SPACE-BELOW FOR USE OF U.S. MARSHAL ONLY-DO NOT	WRITE BELOW THIS/LINE
	d USIAS Deputy or Clerk Date
(Sign only for USM 285 if more than one USM 285 is submitted)	vsly 6/15/21
I hereby certify and return that I \(\subseteq \text{have personally served} \), \(\subseteq \text{have legal evidence of service} \), \(\subseteq \text{have ex on the individual} \), company, corporation, stc., at the address shown above on the on the individual company	
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named at	ove (See remarks below)
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date Time am
	6-16-21 1:00 12 pm
•	Signature of U.S. Marshal or Deputy
(7) hrs including endeavors)	Amount owed to U.S. Marshal* or (Amount of Refund*)
130.00 (59.36)	139.86
REMARKS: 4/15/21 Forward to DUSM Tolliver-	for P/s.
-(1-1	1

1. CLERK OF THE COURT

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

0:20-cv-04519-SAL-PJG

Date Filed 06/23/21 Entry Number 42

Page 2 of

U.S. Department of Justice United States Marshala Service

PROCESS RECEIPT AND RETURN See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF James B. Mulphy	COURT CASE NUMBE	19:5AL-P.16
LPL, HARRIS # 10845	TYPE OF PROCESS	IS
SERVE	CRIPTION OF PROPERTY TO	SEIZE OR CONDEMN
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 435 WILE Pd. ATUEN South CARC	tust 2980	/ 8 章 百
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW JAMES B. Muchil # 137361	Number of process to be served with this Form 285	-6
435 WILE RUGA	Number of parties to be served in this case	PM 1:
LATHEN, South Chrestona 29801	Check for service on U.S.A.	10
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SEI All Telephone Numbers, and Estimated Times Available for Service):	VICE (Include Business and A	
AILLEN CO. JATI	A 75	Fold
3-5- 3-31- WOLKS Feom 7	LUO PM 10 TH	OD AM
Signature of Attorney other Originator reguesting service on behalf of:	TELEPHONE NUMBER	DATE /
Mas S. Alunder DEFENDANT		3/4/21
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NO	T WRITE BELOW	THIS/LINE
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted) Total Process Origin No. 1	zad DSMS Departy or Clerk	Date 6/15/2
I hereby certify and return that I \(\sum_{\text{have personally served}} \), \(\sum_{\text{have legal evidence of service}} \) have on the individual, company, corporation, etc., at the address shown above on the on the individual, company.	executed as shown in "Remarks" my, corporation, etc. shown at the	, the process described address inserted below.
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named	abovo (See remorks below)	
Name and title of individual served (if not shown above)		ble age and discretion efendant's usual place
Address (complete only different than shown above)	Date	Time
	6-16-2)	1:00 Dem
EVEL COLU	Signature of U.S. Mar	shal or Deputy
Service See Total Mileage Charges Forwarding Fee Total Charges Advance Deposits	Amount owed to U.S. Marshal (Amount of Refund*)	
130:00 59:36 189:36 REMARKS: 6/15/21 FORWARD 40 DUSM TOL	189.36	
REMARKS: 76/15/21 Forward to DUSM Toll	rver for P	' 5

I. CLERK OF THE COURT

2, USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed, Please remit promptly payable to U.S. Mershal,
5. ACKNOWLEDGMENT OF RECEIPT

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF AMES B. MURPHY	COURT CASE NUME	9.541-P(G
DEFENDANTS	TYPE OF PROCESS	
SERVE SERVE LA WILLIAMS LONDON BTC. TO SERVE OR DES		O SEIZE OR CONDEMN
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 435 WINE Rd, ATVEN South	AROLENA ?	2980/3
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW JAMES B. MULLIN # 1373/1	Number of process to be served with this Form 285	8 3
435 WIRE ROAD ATKEN, South CAROLLA	Number of parties to be served in this case	1-6
L 29801	Check for service on U.S.A.	PM I
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SER All Telephone Numbers, and Estimated Times Available for Service):		- 0
ATKEN Co. SACI EVELY thursday	300 PM - 1	1:00PM
Signature of Attorney other Originator requesting service on behalf of:	FELEPHONE NUMBER	DATE /
DEFENDANT DEFENDANT		3/4/21
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY- DO NO	T WRITE BELOW	THIS LINE
I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted) Total Process District of Origin Serve No. 1 No. 1	zed ISMS Deputy or Clerk	Date 6/15/2
I hereby certify and return that I have personally served, have legal evidence of service, have on the individual, company, corporation, etc., at the address shown above on the on the individual, company.		
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named	above (See remarks below)	·
Name and title of individual served (if not shown above) X 1 + Brad L		able age and discretion defendant's usual place
Address (complete only different than shown above)	6-16-21	Time am
ливід 4: 1 (Signature of U.S. Ma	rshal or Deputy
Service Fee of Total Mileage Charges Forwarding Fee Total Charges Advance Deposits	Amount owed to U.S. Marsha (Amount of Refund*)	l ⁺ or
1300 59.36 189.56	189.3	6
REMARKS: 31/15/21 Forward to Dusm Tolli	ver for P	5
L CURRY OF THE COURT	noion c	DITIONS MAY BE USED

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/80

Page 4 of

U.S. Department of Justice United States Marshals Service

PROCESS LICEIPT AND RETURN See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF COURT CASE NUMBER DEFENDANT CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN SERVE SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses. All Telephone Numbers, and Estimated Times Available for Service): Archen Co. SATI 3-521-3-31-21 7:00. P.M - 7:00 AM Fold Fold Signature of Attorney other Originator requesting service on behalf of: TELEPHONE NUMBER DATE PLAINTIFF ☐ DEFENDANT SPACE BELOW ROF U.S. MARSHAL ONLY-DO NOT WRITE BELOW THIS LINE FOR/US District of District to I acknowledge receipt for the total Total Process Signature of Auti Origin Serve number of process indicated. (Sign only for USM 285 if more No. than one USM 285 is submitted) No I hereby certify and return that I 📈 have personally served, 🗀 have legal evidence of service, 💟 have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc., shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below) Name and title of individual served (if not shown above) A person of suitable age and discretion then residing in defendant's usual place of abode ddress (complete only different than shown above Deta Time Signature of U.S. Marshal or Deputy Amount owed to U.S. Marshal* or Total Mileage Charges | Porwarding Fee Total Charges Advance Deposits (Amount of Refund*) Cluding endeavors) DUSM TOll

I. CLERK OF THE COURT

2. USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PROCESS RECEIPT AND RETURN See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF JAMS B. Muethy	COURT CASE NUMBER O 20 - 45 G SA - DIC	
SARA LENDETTE	TYPE OF PROCESS Summ ovs	
SERVE SALA LED PETTEL LA ATTENT	THE TION OF PROPERTY TO SEIZE OR CONDEMN	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 435 WILLS ROAD, AIKEN, South LA	ROLTNA 29801	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW AMES B. MURPHY # 137361	Number of process to be served with this Form 285	
435 WILLE ROAD	Number of parties to be served in this case	
ATLANI South CAROLENA 29801	Check for service on U.S.A.	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SER All Telephone Numbers, and Estimated Times Available for Service):	/ICE (Include Business and Alternate Addresses.	
She wolks 4:00 PM - 4:00 A		
AIKEN Co. SAIL MEDICAL DEPT	<u>.</u> .	
Signature of Attorney other Originator requesting service on behalf of: PLAINTIFF DEFENDANT DEFENDANT	TEPHONE NUMBER DATE 3/6/2/	
(SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NO	r write below this line	
number of process indicated. (Sign anby for USM 285 if more	ad USMS Deputy or Clerk Date 6/5/2	
than one USM 285 is submitted) No.		
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named a		
Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (complete only different the wellown above)	Date Time am am	
Service Feet	Signature of U.S. Marshal or Deputy	
	Amount owed to U.S. Marshal* or (Amount of Refund*)	
130.00 189-36	189.36	
REMARKS: 4/15/21 Forward to DUSM Tol	iver for P/S	

I. CLERK OF THE COURT

2, USMS RECORD

3. NOTICE OF SERVICE

4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.

5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285 Rev. 12/80

PROCESS RECEIPT AND RETURN See "Instructions for Service of Process by U.S. Marshal"

PLAINTIPF AMOS B. Muesky # 137361	COURT CASE NUMBER	
	1120-4519-5H1-136	
DEPENDANT	TYPE OF PROCESS	
- TEOD DEPOTICE NAME UNLADURY AT ACOC	- YUMMOUS	
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESC	RIPTION OF PROPERTY TO SEIZE OR CONDEMN	
SERVE) MULLOWN NAME GOOD SHLUTCE COMA	end Alic Kttelnen	
AT ADDRESS (Street or RFD, Apartment No., City, Sigle and ZIP Code)	1 . 3 3	
2/24 INTOF DA ATILITY SULPHI	Appleila 1980 E =	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Windows Company	
	Number of process to be served with this Form 285	
- JAMES B. MURAMI # 13936/		
420 1000 21	Number of parties to be	
435 WILE 24	served in this case	
ATLEN, South CAROTTURA		
26801	Check for service	
27001		
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERV	ICB (Incinde Business and Alternate Addresses.	
All Telephone Numbers, and Estimated Times Available for Service):	Colla do Colla Fold	
50 Me SuleWISOL IS HOLE FROM 4	00 MM - 12 / PM ==	
7DAYS AWEEK IN ACID KI	TCHEN	
Refuses to Provide Unive of LOM PAUL	To Dhat 117-16	
REPUSES TO THOU LOSE WHITE OF GUIN NAVY	DIATILITY	
Signature of Attorney other Originator requesting service on behalf of: PLAINTIFF TE	LEPHONE NUMBER DATE	
(DOMA) B. MILLANIA DEFENDANT	1/11 2/1/21	
	10/14 S/6/21	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT	I WRITE BELOW THIS LINE	
I acknowledge receipt for the total Total Process District of District to Signature of Authoriza	d USMA Deputy or Clerk Date	
number of process indicated. Origin Serve	h. 11.1	
(Sign only for USM 285 if more than one USM 285 is submitted)	erving 4/15/4	
I hereby certify and return that I \(\) have personally served, \(\) have legal evidence of service, \(\) have exon the individual, company, corporation, etc., at the address shown above on the on the individual, company	ecuted as shown in "Remarks", the process described	
on the individual, company, corporation, etc., at the address above on the on the individual, company	, corporation, etc. shown at the address inserted below.	
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$V \notin E Q_{\alpha} d Q_{\alpha}$	then residing in defendant's usual place	
M GT TOY OUT	of abode	
Address Complete only different than shown whove	Date Time an	
	6-16-21 1:00 Dpm	
	Signature of U.S. Marshal or Deputy	
j ~ ū 5	900	
Service F60 Total Mileage Charges Forwarding Fee Total Charges Advance Deposits	Amount owed to U.S. Marshal* or	
	(Amount of Refund*)	
106) Miles (/) 189-36	109.3/	
59.36	101,70	
REMARKS: 4/15/21 Forward to DUSM Tolli	10 tor P/c	
The last to be a soft of the		
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PROCESS RECEIPT AND RETURN See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	COURT CASE NUME	IPD /	
AMES B. MURCHY 0:20-4519-54-		19-Al-PV-	
DEFENDANT	TYPE OF PROCESS	II OH IV	
KITUGH LAN SHI (ONTEACTED)	KI HIGH LAN SHP (ONTLANTED) SUMMOUN		
NAME OF INDIVIDUAL, COMPANY, CORPORATION. BTC. TO SERVE OR DES	AMEND DE LE TELLE	O SEIZE OR CONDEMN	
SERVE & R. PUGH LIN SHI CONTRACTES		202	
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	1	20/20 \$ 7	
435 WINE RAI HOLON, Jouth LA	replINA ZYS		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be	-6 -6	
JAMES B. MULPHY # 137361	served with this Form 285	3	
	Number of parties to be served in this case	S	
435 WILL ROAD	SOLAGO IO IDIS CASE	· · ·	
ATILEXII South CAROLTUA 2007	Check for service	0	
L 29801	on U.S.A.	C)	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SER All Telephone Numbers, and Estimated Times Available for Service):	VICE (Include Business and .	ilternate Addresses.	
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THERE HEAD DUATELS HADES AT AC	SC Tiouten	-4: PM.	
Chattan 8064, TN 37421 435	SC MAINT	10,000	
LNATTANOUBA, IN 51721 435	WILE Rd	2Ua /	
AIK	GU, 20 29	801	
Signature of Attorney other Originator requesting service on behalf of: V PLAINTIFF T	ELEPHONE NUMBER	DATE	
(And An) B. Market Dependent		2/1/21	
ANTO U. TOMAN		76/4	
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-DO NO	T WRITE BELOW	THIS LINE	
	and USMS Deputy or Clerk	Date	
number of process indicated. (Sign only for USM 285 if more	hulder	6/15/2	
than one USM 285 is submitted) No. No. No.	may _	<u> </u>	
I hereby certify and return that I \(\square\) have personally served, \(\square\) have legal evidence of service, \(\sqrt{2} \) have a	xecuted as shown in "Remarks	, the process described	
on the individual, company, corporation, etc., at the address shown above on the on the individual, compar	y, corporation, etc. shown at th	e address inserted below.	
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named	bove (See remarks below)		
Name and title of individual served (if not shown above)		able age and discretion	
X Ent Brade	then residing in of abode	defendant's usual place	
Address Templete only different than shown above)	Date	Time am	
₩₩ △	6-16-21	11.00 pm	
	Signature of U.S. Ma		
Z	(Z)=		
Service F60 Total Mileage Charges Forwarding Fee Total Charges Advance Deposits	Amount owed to U.S. Marsha	ii* or	
(Z) ars Encluding endeavors)	(Amount of Refund*)		
1 5 T (06) miles () 189 26	189.3	'	
39.50 / -			
REMARKS: 6/15/21 Forward to DUSM Tolliver for P/S			
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1. CLERK OF THE COURT

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